

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09/227,518

FILING DATE

01-08-99

APPLICANT(S)

GARSEL G

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3	1					
4	1					
5	1					
6	1					
7						
8						
9						
10						
11						
12						
13						
14	1					
15	1					
16	1					
17	1					
18						
19			1			
20			1	4		
21						
22			1			
23			1			
24			1			
25			1			
26			1			
27			1			
28			1			
29			2			
30			1			
31			1			
32			1			
33			2			
34			2			
35			2			
36			1			
37			1			
38			1			
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.			2			
TOTAL DEP.			28			
TOTAL CLAIMS			30			

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
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97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS